Nurse Corps Newsletter

"Honored as a Nurse, Respected as an Officer".



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NURSE CORPS NEWS

DIRECTOR'S MESSAGE

A Message from the Nurse Corps Director

Cynthia Kuehner, RDML, NC, USN

The Navy christened its newest Arleigh Burke-class guided missile destroyer, the USS Lenah Sutcliffe Higbee (DDG 123), during a ceremony on Saturday, April 24, in Pascagoula, Mississippi.

The ship's namesake, Lenah Sutcliffe Higbee, served as the second Superintendent of the Navy Nurse Corps in 1911 and was the first living woman recipient of the Navy Cross. When she entered naval service in 1908, she was one of the first 20 women, known as the "Sacred Twenty," to join the newly established Navy Nurse Corps and contributed her nursing skills to the Navy during the First World War.

On behalf of the Chief of Naval Operations, Rear Adm. Cynthia Kuehner, Commander, Naval Medical Forces Support Command/26th Director of the Navy Nurse Corps, delivered christening ceremony remarks highlighting the significant challenges and trailblazing accomplishments of this exceptional Navy Nurse

Corps visionary leader, Superintendent Higbee. Click <u>here</u> to view recorded ceremony via YouTube!

NURSE CORPS NEWS PAGE 2



Christening of the Lenah Sutcliffe



DEPUTY DIRECTOR'S MESSAGE



Happy early Spring to the Nurse Corps! Wow, it has been just over a year since both Reserve and Active Duty mobilized in support of the COVID-19 pandemic to care for our citizens here at home. From the Reserve side of the house, the impressive response and volunteerism that were displayed was nothing short of remarkable. Many of you were on the road within hours. The professionalism that you displayed while deployed to New York, USNS Mercy and Comfort, along with many other places in small teams and Guam was impressive and awe-inspiring. Civilian staff at the New York hospitals often commented they could tell who was military and who was civilian just by the way a nurse carried themselves, the teamwork effort and the leadership that was displayed. The Reservists proved how quickly they could mobilize in a timely fashion. This tremendous effort gave credence to future processes for

A Message from the Nurse Corps Deputy Director (Reserve Component)

Eric Peterson, RDML, NC, USN

Reservists to streamline mobilization. With every "new" process, as this was, there are bumps in the road and the COVID mobilization was not without issues. Many of you felt them, and continue to deal with issues regarding items such as pay, benefits, stress and mental fatigue given the assignments and mortality rates in some areas. Rest assured that these issues have received the highest visibility and continue to be worked on at a system level. In fact, this mobilization event spurred the re-prioritization of lines of effort, including a complete overhaul of the pay system. Thank you to all of you for the many constructive feedback comments to the Reserve Forces staff! The suggestions have been received and forwarded to upgrade the system in order to not repeat past mistakes.

We congratulated you all before on your performance and I am thanking you all again. Thank you to all who volunteered and deployed, and those who could not because they were critical in the civilian community in supporting the health crisis of their respective hospitals.

I was reminded of the significant contributions of the Nurse Corps throughout Naval history when I was invited to the Christening of the U.S.S. Higbee. It was an honor to represent all of you as we christened the second ship to carry Lenah Higbee's name. She was one of the "Sacred Twenty," first living female recipient of the Navy Cross, and second superintendent of the Navy Nurse Corps. We are all part of a unique organization in Navy Nursing. I am constantly amazed and proud of what you all have done, and continue to do in support of our war fighters, citizens and each other. I want to remind you of how special you all are, and vital your contributions are to the Nation's defense by leading from the front in the care of our war fighters and each other. Continue to lean forward and lead the way as Nurse Corps officers always have. Bravo Zulu!

RDML Eric L. Peterson

11th Deputy Director, Navy Nurse Corps, Reserve Component

COMMUNITY UPDATE



Damien Storz CDR, NC, USN Operational Nursing Specialty Leader

Suzanne Fierros CDR, NC, USN Assistant Specialty Leader

Fleet Operational Nursing: An essential role and remarkable opportunity

Operational fleet nurses are part of the power of one Navy medicine team in direct support of war fighting readiness.

In normal circumstances it is an extraordinary effort to get a Carrier Strike Group successfully out to sea, and the operational fleet nurse plays an essential role in preparing to go to sea for every mission.

How do we ensure the sailors, remain healthy in order to fulfill the mission?

This is a quest that medical as a whole continually works towards every day. The goal is to have a crew 100% fully medically ready in order to deploy at a moment's notice. Now, compound this extraordinary feat with COVID.

Operational Nursing

A Carrier Strike Group (CSG) is an operational formation composed of roughly 7,500 personnel, which consists of an aircraft carrier, at least one cruiser, a destroyer squadron of at least two destroyers or frigates and a carrier air wing of 65-70 aircraft.

The coordination and teamwork demonstrated by all medical personnel while preparing CSG 3 and CSG 2 for their deployments was nothing short of extraordinary. The training windows and restriction of movement sequesters occurred over the holiday season, and the notable increased COVID case load further complicated the evolution.

The creation of the "bubble", a COVID free zone, with all embarked personnel on all the CSG platforms was the goal. Nurses played multiple roles across all the platforms in every aspect of this evolution. They networked and communicated with all departments of all the ships and air wings, to ensure all sailors would be swabbed, not once, but twice. The nurse assisted in the coordination and management of the test-in and test-out SWABEX, often starting in the middle of the night. Behind the scenes they scrubbed personnel rosters, placed laboratory orders, printed patient labels and assembled test kits.

Safety for all involved was a must. Our nurses calculated personal protective equipment (PPE) burn rates, established appropriate PPE quantities, and certified the availability of all necessary equipment. The proper identification of each

patient prior to the procedure was a multi-step process whereby they physically performed the procedure of obtaining the culture, and confirmed the evolution was completed with the utmost emphasis on safety. Quality assurance was, as always, a key factor within the nurses' role. They demonstrated this by verifying all test kits were packaged appropriately packed in transport containers with accurate rosters for laboratory delivery. They communicated with the main laboratory to certify safe arrival of all specimens and continued the contact tracing of the results as they came in. This process was the beginning of the "bubble."

Patients and medical personnel waited for results from the first test to either: move sailors aboard the ships or for those who were positive to complete the quarantine status, awaiting appropriate medical approval before embarking.

There were multiple evolutions being conducted simultaneously across the waterfront on both coasts. Operational fleet nurses came together to ensure the mission was manned and equipped to conduct a smooth, safe, quick, evolution for the entire strike group.

Next on the agenda for our fleet operational nurses is to ensure we bring the vaccination to the entire fleet, in the same dedicated manner they carried out the SWABEX evolution.~



COMMUNITY UPDATE



Tuesday Adams LCDR, NC, USN 1910 Specialty Leader

Gabrielle Crane CDR, NC, USN Assistant Specialty Leader

Greetings Medical-Surgical Nurses!

As my tenure as the 1910 Assistant Specialty Leader comes to an end I reflect on the incredible impact and contribution of this community. Representing the largest and most diverse community was an honor and the most rewarding "collateral duty" of my career. If you have ever considered representing your community in this capacity, don't just consider it, make the leap!

The 1910 community has been integral in fighting the COVID pandemic-from initiating COVID testing sites and procedures, to being on the front-line caring for those battling the virus, to working towards ending the pandemic by getting shots in arms. The diversity and flexibility of Medical-Surgical (Med-Surg) nursing provides the strength needed for COVID relief efforts, and our presence has been evident across the country, coast to coast.

OUR BEST SHOT: Fort Belvoir Community Hospital COVID Vaccine Clinic

Medical-Surgical Nursing (1910)

When was the last time you administered a vaccine? Can you reach back to Med-Surg 101 and recall the proper method for triangulating the text-book deltoid injection site? Or even further back to cell biology for what is mRNA? We might also be asking ourselves, have we ever been asked to do something more important?

Many of us have been detailed to COVID vaccination efforts at Military Treatment Facilities, Federal Emergency Management Agency sites, and other clinics across the nation and globe. At Fort Belvoir Community Hospital, our nurses work beside medics and Corpsmen to screen and educate patients, prepare the vaccine, administer the dose, and constantly monitor for signs and symptoms of an adverse reaction.

At Fort Belvoir Community Hospital, the COVID Vaccination Clinic has been the highlight of our military careers. It's truly astonishing what a team of Sailors and Soldiers – enlisted and officers – can accomplish; we've achieved a high level of functioning at a novel clinic through the application of two vital attributes: adaptability and experience. This team has been an exceptional example of what can be built in a matter of days when each member is an active, motivated participant.

While adaptability has been vitally important, a solid medical-surgical background has also been paramount. We have personnel from a variety of inpatient wards and clinics, allowing us to synthesize a vast range of knowledge and learn from one another. Our staff, who are new to the fleet, gain knowledge in medicine, clinic organization, teamwork, and mission operations. It is our hope that each person involved in this mission, from HN to HMC and Ensign to Captain, leaves feeling empowered to

carry their knowledge and ideas wherever the military sends them next. We are Med-Surg nurses, adept at handling any new patient, new medication, and now - ending this high stakes pandemic situation.

We are Navy Nurses... READY – RELEVANT – RESILIENT!

Thank you for all you do each and every day for our patients, families, and each other.

For more information regarding medical surgical nursing visit our milSuite page or request to be a part of our Listserv email.~



Above/Below: (March 2021) LT Antoinette Mantz (OIC) and LTJG Emma Crews (not pictured LTJG Mathew McElroy) (AOICs), Fort Belvoir Community Hospital COVID Vaccine Clinic, Taken/Released by FBCH PAO.



COMMUNITY UPDATE



Tim Whiting CDR, NC, USN 1940 Specialty Leader

Tracy Krauss
CDR, NC, USN
Assistant Specialty Leader

March of this year marks the one year anniversary of COVID bringing life as we knew it to an abrupt halt. Over the past year the battle against SARS-CoV-2 raged in nearly every country in the world. Healthcare workers found themselves thrust into action to hold the battle lines as hospitals overflowed. Navy nurses from all specialties performed in a manner that demonstrated the resiliency and expertise come to be expected by the Nurse Corps. The Public Health Nursing (PHN) Community was no different. COVID provided an opportunity for our small community to demonstrate our might.

The following are a few examples of PHNs leading during the pandemic. LCDR Stefanie Nochisaki was the COVID response cell lead and the Assistant Public Health Emergency (APHEO) officer at USNH Okinawa. LCDR Nikki Pritchard, while serving as the Director for Public Health (DPH) and the APHEO for NH 29 Palms, served on the Commanding General's Crisis Action Team and was sought out across the installation for public health guidance and recom-

Public Health Nursing (1940)

mendations. At NHC Lemoore, LCDR Penny Jimenez led COVID screening teams early on and is now on the front lines of providing vaccine. Prior to assuming the role of Chief Nursing Officer at NHC Lemoore, CAPT Michelle Waara was one of the Emergency Operations Center Battle Watch Captains for the Navy and Marine Corps Public Health Center leading a team helping to shape the Navy's COVID Response effort. LCDR Jenny Paul served as the acting PHEO for the Great Lakes region and has been a key contributor to mitigating the disruption to the recruit and student pipelines at Naval Station Great Lakes. LCDR Laurabeth Brogdon ran the Triage Screening Tents and the hospital screening process at NH Guantanamo Bay. CDR Misty Scheel, while serving as DPH at NH Naples, has been the consummate leader over the past year having a key role in standing up the Hospital Incident Command system, facilitating key contact tracing investigation training for tenant commands and executing the COVID vaccination roll out. At NH Jacksonville, LCDR Julie Schaub led a team to execute one of the DoD's first off-site COVID vaccine locations, leading to over 22,000 vaccinations. At Naval Medical Center Portsmouth, LCDR Graham is leading a joint departmental effort to get vaccines to the high risk beneficiary population. While serving as OIC of the Washington Navy Yard Clinic, CDR Tracy Krauss was instrumental in the vaccine roll out to first responders and is serving as APHEO for Naval District Washington and Naval Support Activity Washington. CDR Tim Whiting has served as the regional COVID task force lead for Naval Medical Forces Pacific, providing key leadership support to the COVID testing and vaccine strategy across the region.

The examples provided are a snapshot of the significant contributions that have been made by the Public Health Nursing Community to the COVID battle. In a year consumed by all things COVID, several members of the community have been able to focus some effort towards other important endeavors. CAPT Denise Gechas recently completed an MIT certification course on Artificial Intelligence in Healthcare. This technology may assist in early detection of disease and providing better prevention and response options for managing complex public health issues. LCDR Darcey Reilly helped Walter Reed National Military Medical Center (WRNMMC) initiate an Active Duty Patient Center Medical Home (PCMH) aimed at increasing readiness through direct access to care, with embedded specialty care centered on the unique needs of this population. She also helped the PCMH clinic develop its first Preventive Health Team.

From the USNS Mercy and the USNS Comfort in L.A. and New York for testing and vaccine roll out, Public Health Nurses are at the forefront of Navy Medicine's battle against COVID. PHNs are reliable and proven responders during infectious disease emergencies and stand at the ready to continue the fight against COVID. If you are interested in learning more about the 1940 community please contact CDR Tim Whiting or CDR Tracy Krauss.~



COMMUNITY UPDATE



All of our lives changed personally and professionally with the global pandemic. In a time of need, Certified Registered Nurse Anesthetists (CRNA) fulfilled various roles to support their respective hospital systems. Some continued their roles in the perioperative setting when surgeries declined. Many others managed the ICU patients in placement of advanced airways and critical access lines. The 1972 Reserve Community further assisted their hospitals in management of prone intubated patients, and supplemented staffing in the critical care setting. Moreover, the 1972 Reserve Community supported Navy Reserve Force missions by mobilizing 31 CRNAs for COVID missions supporting New York City, USNS Comfort, USNS Mercy and Guam. We also have 1972 members who are forward deployed in support of other Navy missions.

Here are some of the other things our 1972 Community has been doing:

American Association of Nurse Anesthetist (AANA) 2020 Annual Congress

LT John Woods was selected as a member of the AANA Founda-

Nurse Anesthesia (1972)

tion Board of Trustees for American Association of Nurse Anesthetist.

LT Cameron Cushenbery mentored students who were participating in Poster Sessions as clinical faculty.

Fleet Readiness

LCDR Trevares Baker attends Naval War College.

CDR Joe Blair attends Naval War College.

CDR Gregory Smith earns Fleet Marine Force Warfare Officer.

TNCC Instructor Cadres and Course Directors ensure trauma training of Reserve Forces: CAPT Trent Friedel, CAPT Pamela Kilmartin, CAPT Johnny Sacco, CAPT Valerie Diaz, CDR David Dawson, CDR Jon Johnson, LCDR Trevares Baker, LCDR Ranata Simmons, LCDR Darrel Freeman, LCDR David Glenn, LCDR John Ladd, LT Steven Hale, LT Cameron Cushenbery.

Advance Degrees and Adjunct Faculty

CDR Gregory Smith DNP joins Virginia Commonwealth University as adjunct faculty.

CDR Jason Gillespie remains at UNMC College of Nursing as adjunct faculty.

LCDR Hope Ferguson DNP remains at United States Army Graduate Program in Anesthesia

Nursing (USAGPAN) as adjunct faculty.

LT Latrice Martin DNP remains at Frontier Nursing University as adjunct faculty.

LT Jerome Shitteh DNP remains at State University of New York at Buffalo as adjunct faculty.

Personal Awards

LCDR Jason Duprat receives University of Central Florida College of Nursing's Noble Knight Award.~



Nurse Residency Program



LaTarya Gulley LCDR, NC, USN NMRTC Portsmouth Nurse Residency Program Director

Readiness, Relevance, Resilience

Our Nurse Residency Program has been granted reaccreditation by the American Nurses Credentialing Center's (ANCC) Commission on Accreditation in Practice Transition Programs (PTAP) through January 2025. PTAP accreditation is available to any organization that transitions nurses within its environment, regardless of size, setting, or location. Programs that use the PTAP framework find value in being able to improve structures and processes by creating robust, comprehensive programs for nurses' transition into and within the profession. Accreditation is a one year process that consists of a 500 page self-study submission, an appraiser review and virtual visit, a nurse resident survev. and the final ANCC Commission on Accreditation final decision. In this recent reaccreditation cycle, the ANCC Commission on Accreditation team highlighted our Staffing Effectiveness Team (SET) process which assigns Nurse Residents to their permanent unit in

Phase III of the program. The SET process provides opportunities for new nurses to practice in various specialties while also meeting the command's staffing requirements.

Our Nurse Residency Program strives to prepare novice nurses entering the Navy Nurse Corps to effectively perform in a variety of settings. The COVID pandemic has challenged us even further to graduate a diverse group of competent nurses who are ready to meet the mission. During the pandemic, the program highlighted the resiliency of our Nurse Corps. Current nurse residents and graduate nurse residents supported the NMRTC Portsmouth COVID callcenter, drive through testing, USNS Comfort deployment to New York, and currently Defense Support of Civil Authorities teams all over the nation. We graciously applaud their efforts and encourage them to maintain that spirit of camaraderie and agility.

One of the methods utilized to prepare our novice nurses is our monthly Grand Rounds. During the COVID pandemic, we transitioned to a virtual setting. Grand Rounds is an eight hour didactic session that includes relevant clinical practice and general military training topics presented by various medical and nursing faculty, senior enlisted leaders, and nursing leaders. Some of the topics covered in Grand Rounds included: social media, ethical dilemmas in nursing care, oxygen modalities, stroke, STEMI, and sepsis. The nurse residents present a clinical case study and cultural presentation as a pre-requisite to graduation from the program. Grand Rounds presentation by the nurse

residents is designed to incorporate the knowledge and skills learned throughout the program.

This pandemic has definitely stretched our resources, tested our resilience, and revealed what a powerful force we can be when we are all working towards the same goal. Let's continue to be good shipmates and support each other through this pandemic and continue to press forward! Be vigilant and wear your masks!~



~*Happy Certified Nurses Day*~



1,517 CERTIFIED NAVY NURSES

Professional Nursing Community	99
Nursing Education Community	5
Medical-Surgical Community	234
Labor and Delivery Community	84
Pediatric Nursing	54
Psychiatric Nursing	43
Community Health	
ER/Trauma Nursing	.190
Perioperative Nursing	215
Critical Care Nursing	302
NICU Nursing	.24
CRNA Community	115
Mental Health NP	.20
Pediatric NP	.21
Family NP	.73
Nurse Midwife	29





Certified Nurses DayTM is an annual day of recognition for and by healthcare leaders dedicated to nursing professionalism, excellence, recognition, and service. Every March 19, employers, certification boards, education facilities, and healthcare providers celebrate and publicly acknowledge nurses who earn and maintain the highest credentials in their specialty. Certified Nurses DayTM honors nurses worldwide who contribute to improved patient outcomes through national board certification in their specialty.

It occurs every March 19, the birthday of Dr. Margretta "Gretta" Madden Styles, RN, EdD, FAAN, one of the greatest leaders in the field of nursing certification. She recognized the critical importance of creden-



tialing before broad awareness of its value and her work created global impact on the nursing profession. Dr. Styles architected the first comprehensive study of nurse credentialing in the 1970s. She then pioneered the development and implementation of standards and credentials for nurses. In the 1980s, she spearheaded the definitive work of the International Council of Nurses on nursing regulation. A driving force behind the creation of the American Nurses Credentialing Center, Dr. Styles advanced nurse certification services and programs across the US and abroad.



If you or your nursing staff have achieved certification, the Navy Nurse Corps Newsletter wants to recognize that accomplishment on our **Bravo Zulu** page. Please submit the individual's rank, full name, command and achieved certification! The NC News group can be contacted via email at <u>usn.ncr.bumedfchva.list.nc-newsletter@mail.mil</u>.



Farewell CAPT Bradley



Excerpts from The Last of the Technical Nurse Warrant Officer Bids Farewell

In 1990, the Bureau of Medicine and Surgery (BUMED) established the Technical Nurse Warrant Officer (TNWO) program to address the ongoing shortage of BSN nurses in the Navy. The program allowed for nurses with Associates Degrees to enter the Nurse Corps as a Warrant Officer grade 1 (WO-1) and rise to the rank of Chief Warrant Officer grade 3 (CWO-3). Unlike commissioned officers, TNWOs held their authority through warrants signed by the Secretary of the Navy rather than the President of the United States. For Captain Donna Bradley, the warrant officer program offered an opportunity to achieve her dream of a Navy career while still pursuing her educational goals.

Captain Bradley, a Michigan native became a Licensed Practical Nurse in 1987 and completed an Associate's Degree in Nursing in 1991. She applied to the Navy's TNWO program in 1991 after seeing a mailer and was accepted into service. Following indoctrination at Newport, R.I., CAPT Bradley was assigned to Naval Hospital San Diego as a Staff Nurse on the Mother Infant and Same Day Surgery Wards.



CAPT Bradley took opportunities afforded as a TNWO and was selected for Full-Time Out-Service Training. She completed her BSN and later MSN as a Perioperative Clinical Nurse Specialist. During this period, BUMED dissolved the TNWO program. Some of the warrant officer nurses left the service, and some, like CAPT Bradley, became commissioned officers in the Nurse Corps.

As she looks back today, CAPT Bradley remains proud of her time as a nurse warrant officer and thinks Navy Medicine benefited from having the additional expertise of TNWOs. Although she would not change anything from her career, the guidance she would impart to a WO1 Donna Bradley 29 years ago applies to us all and can be summed up as "savor each moment."

Story by: Andre Soboncinski

March 16, 2021

US Navy Bureau of Medicine and Surgery

For the entire article, click on the NC Leaf ~~~>











Left: Aug 1992; WO1 Donna Bradley teaching a pregnant teen at a local high school about fetal heart beats. Middle: Aug 1996; Warrant Officer Donna Bradley getting promoted to Ensign in 1996. Right: May 1999; Bradley receiving a coin from Admiral Kathy Martin, Nurse Corps Director, for excellence as a Junior NC officer at Naval Hospital Groton. Photos courtesy of BUMED PAO/Released.



Member Spotlight

Navy Reserve Nurse Corps Readiness:

LT Lazo and LT Ng exemplified the Navy ethos of Always Ready, Anytime, Anywhere

During this unprecedented time of the COVID pandemic, the concept of Navy Readiness has definitely touched the Navy Reserve Nurse Corps. We have responded to the call to action in different capacities and on different platforms. We have always performed to the best of our ability in our designated subspecialty areas; however, this pandemic has highlighted our readiness to jump into untested waters to provide support wherever we are needed. This article highlights COVID support for Commander Pacific Fleet (COMPACFLT).

COMPACFLT in Pearl Harbor sent out a call for COVID support in March 2020. Two NC officers with NR NMRTC San Diego Det D based in Pearl Harbor answered the call and embarked on a journey outside of their clinical workspaces. LT Norman Lazo, a perioperative nurse and LT David Ng, a medical surgical nurse volunteered their support.



LT Lazo was initially assigned to COMPACFLT COVID19 A1 emergent response. His mission began on 23 March 2020, and was to provide DoD support for the COVID outbreak under the CPF N1 APC COVID response cell. His orders were converted to mobilization for contingency operations as a CDO/briefer in May 2020. His orders were extended with an end date of January 2021. LT Lazo provided shift watch team support and OPREP data reports for PACFLT Commander and SECNAV. LT Lazo adapted to the change in environment from operating rooms to dynamic administrative settings. His willingness to learn and adapt helped develop his understanding of ADCON, OPCON and HPCON data, and provided critical support for the COMPACFLT mission.



LT Ng was tapped to support COMPACFLT N1 Division as Executive Assistant. LT Ng seamlessly transitioned to the administrative setting, a far cry from his direct-care, patient-centered setting. He oversaw and managed N1 senior leadership calendars and administrative oversight of the N1 department. His ADT orders converted to mobilization in support of the COMPACFLT COVID response.



Submitted by: LCDR Louella Van Osdol, NC
Assistant Command Training Officer
NR NMRTC San Diego





Member Spotlight

"Find your Passion and it will Rarely Feel like Work"

CHERRY POINT, NC, UNITED STATES 03.08.2021 Story by Thomas Cieslak Naval Health Clinic Cherry Point

Navy Commander Alana Huber, the Medical Forensic Nurse Examiner at Naval Health Clinic Cherry Point, served over 22 years in the United States Navy before retiring in early April, 2021. Serving in the Navy as a mother to 5 children, says Huber, was the most challenging aspect of her career. Click here for full DVIDS article!



Photo By Thomas Cieslak



Questioning Attitude, Commitment to Patient Safety Drives Navy Nurse



Photo By Thomas Cieslak

CHERRY POINT, NC, UNITED STATES 03.24.2021 Story by Thomas Cieslak Naval Health Clinic Cherry Point

Navy **Lieutenant Tamaran Stewart**, a native of Paris, Texas, serves aboard Naval Health Clinic Cherry Point as a Perioperative Nurse. In late 2020, she recognized a patient safety issue during her daily duties, pursued its resolution over a period of weeks and equipped other Navy and Marine medical facilities to identify and solve the problem. See full article on DVIDS <a href="https://example.com/here/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/health/period/he



BRAVO ZULU!

Certifications

- LTJG Justin Roelofs, NMRTC San Diego, earned his Critical Care Nursing Certification (CCRN—Adult).
- LTJG John Dulko, NMRTC San Diego, earned his Emergency Nursing Certification (CEN).
- LT Kevin Griggs, NMRTC Jacksonville, earned his Wound Care Certification (WCC).
- LT Gregory Yuen, NMRTC Naples, earned his CEN.
- LTJG Antonio De Jesus, NMRTC Portsmouth, earned his CEN.
- LT Jeffrey Stroud, NMRTC Jacksonville, earned his CCRN-Adult.
- LT Erica Moine, 3d Medical Battalion, Okinawa JP, earned her Medical-Surgical Nursing Certification (CMSRN).
- LT Myesha Barr, NMRTU Sasebo, earned her CMSRN.
- LT Cheryl Buckley, NMRTC Lemoore, earned her Ambulatory Care Nursing Certification (ANCC).
- LTJG Cecilia Fosu, NMRTC Portsmouth, earned her CMSRN.
- LTJG Mathew Acevedo, Fort Belvoir Community Hospital, earned his CMSRN.
- LT Saintheresa Jackson, NMRTC Guantanamo Bay Cuba, earned her Inpatient Obstetrics Nursing certification (RNC-OB).
- LTJG Dylan James, NMRTC Guantanamo Bay Cuba, earned his CEN.
- LT Courtney-Jamaal Rouse, NMRTC Camp Pendleton, earned her ANCC Psych/Mental Health Nursing Certification (PMH-BC).
- LTJG Joel Ellis, NMRTC Guam, earned his

- CCRN-Adult and Cardiac Medicine Certification (CMC) through AACN.
- LT John Fassoth, NMRTC Yokosuka Japan, earned his CCRN and his Adult Progressive Care Nursing certification (PCCN).
- LT Devon Dan, NMRTC Camp Lejeune earned her Nurse Anesthetist Certification (CRNA).
- LT Alisen Rockwell, NMRTC Yokosuka Japan earned her CRNA.
- LT Talisha Walker, NMRTC Jacksonville, earned her RNC-OB.
- LTJG Eric Taylor, NMRTC Jacksonville, earned his CEN.
- LT Maciej Wartak, NMRTC San Diego, earned his WCC.
- LT Justina Whearty, NMRTC Portsmouth, earned her CCRN-Adult.
- LTJG Rachel Love, NMRTC Jacksonville, earned her CEN.
- LTJG Johnson Hannah, NMRTC Jackson-ville, earned her RNC-OB.
- LTJG Andrea Telenga, NMRTC Jackson-ville, earned her CCRN-Adult.
- LTJG Taylor Eric, NMRTC Jacksonville, earned his CMSRN.
- LT Samuel Grantham, NMRTC Okinawa, earned his CEN.
- LT Chloelynn Malonzo, NMRTC Okinawa, earned her PMH-BC.
- LTJG Keenan Fitts, NMRTC Portsmouth, earned his CCRN-Adult.
- LT Hana Reichert, NMRTC Sigonella, earned her CMSRN.

BRAVO ZULU!

Certifications

LTJG Joseph Roberto, NMRTC Jackson-ville, earned his CMSRN.

LT Jeremy Moore, EXPED MED FAC KI-LO, earned his CRNA.

LTJG Dominic Docimo, NMRTC San Diego, earned his CEN.

LT Jeremy Lightner, NMRTC Portsmouth, earned his Trauma Nursing certification (TCRN).

LTJG Fremmy Cuadra, NAVHOSP Okinawa, earned CMSRN.

LT Victor Pearson, NMRTC San Diego, is one of 62 nurses in the country to earn all five certifications the BCEN has to offer (CEN, Certified Flight Registered Nurse (CFRN), Certified Pediatric Emergency Nurse (CPEN), Certified Transport Registered Nurse (CTRN), & Trauma Certified Registered Nurse (TCRN))! Bravo Zulu!

Qualifications

LT Jennifer Creech, LT Liezl Dagum, LT Caroline Kivisto, LT Demetrius Pruitt, LT Justin Reeb, and LT Kaitlyn Vangunten,

3d Medical Battalion, Okinawa Japan, earned their Fleet Marine Force Warfare Officer qualification.

LT Nicolle Ely & LT Alisha Grass, 1st Medical Battalion, Camp Pendleton, earned their Fleet Marine Force Warfare Officer qualification.

LCDR Eve Poteet, 11 Marine Reg, Camp Pendleton, earned her Fleet Marine Force Warfare Officer qualification.

Education

LT Erica Monsees, NMRTC Camp Lejeune, earned her Master of Science in Nursing (MSN) in Community Health degree from Liberty University.

CDR Jessica Smith, NR NMRTC Camp Pendleton, earned her Doctor of Nursing Practice (DNP) from the University of North Florida

CDR Christine Truong, NR NMRTC San Diego, earned her Master of Business Administration (MBA) from the University of Michigan.

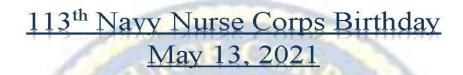
Recognition

CORRECTION:

**The Navy Nurse Corps Newsletter would like to make a correction to our January/February edition: We would like to offer Congratulations to *Dr. Kostas-Polston* and the Nurse Research Department, Naval Medical Readiness and Training Command, Portsmouth for completing a three phase marketing science research study geared to improving the health of our deployed military women warriors. The team recruited 529 voluntary participants over the three phases of the study. Shout out to *CAPT Braun* at Portsmouth for making this research possible.

ANNOUNCEMENTS

Navy Nurse Corps Birthday



On behalf of RDML Cindy Kuehner, RDML Eric Peterson, and the entire Nurse Corps Senior Leadership Team -You are cordially invited to join us for virtual cake-cutting events. Please log in to the Navy Nurse Corps "General" Channel on MS Teams



PM NC Virtual Birthday Celebration: 1800 EST // 1700 CST // 1500 PST

1800-1810: Message from RDML Kuehner
1810-1820: Message from RDML Peterson
1820-1825: NC History: NMRTC San Diego
1825-1830: NC History: NMRTC Camp Pendleton
1830-1835: Overview of USS Higbee Crest

1830-1835: Overview of USS Higbee Crest
 1835-1845: Official Cake Cutting: NMRTC San Diego

If you were previo<mark>usly added to this MS Teams Group</mark> for ANY reason — no additional action is needed. If you would like to be added — please email me CAPT Darling at Julie.NLT 10 May 2021 at <u>Julie.a.darling.mil@mail.mil</u> Log into the Navy Nurse Corps Team and click "Join Meeting"

TriService Nursing Research Program

Navy Nurse Corps Officers,

I am pleased to share the great news that funding for the TriService Nursing Research Program (TSNRP) has been restored. I want to personally thank the nursing leaders, national nursing organizations, and military nurses who supported TSNRP over the past couple of years through this challenging time. TSNRP is thrilled to continue to offer military nurses future opportunities to fund important research and evidence based practice projects that make a difference for our service members and their beneficiaries.

Please see attached course flyers for upcoming educational opportunities:

Grant Camp July 12-16, 2021

TSNRP Research and Evidence Based Practice Dissemination Course

September 13-16, 2021

A call for grant applications will be released July 2021 with a deadline of October 1, 2021. For more information about the TSNRP, please visit our webpage or contact me directly for information at heather.king@usuhs.edu

https://www.usuhs.edu/research/centers/tsnrp/research/funding-opportunities

CAPT Heather King, NC, USN

Executive Director,

TriService Nursing Research Program



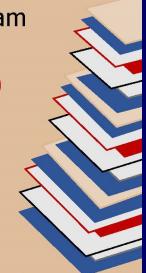
ANNOUNCEMENTS



TriService Nursing Research Program

Grant Camp 2021

12-16 July 2021



The goal of Grant Camp is to write a successful grant proposal. It is intended for military nurses & military nursing graduate students who plan to apply for TSNRP funding. Others may attend on a space-available basis.

- Held in San Antonio, TX
- 30 hours of continuing education hours provided
- Travel is pending DoD and CDC guidance
- Acceptance letters sent by 7 June 2021

To Register:

- · Highly recommended to complete registration process early.
- Deadline for the full application is 31 May 2021
- Application includes 3 to 5 page draft proposal & letter of support from commander, chief nurse, or dissertation/thesis chairperson.
- Submit at https://cvent.me/Qrqvvn



This is a course sponsored by the TriService Nursing Research Program Resource Center 301-319-0598 • http://www.usuhs.edu/tsnrp



MARCH/APRIL 2021

ANNOUNCEMENTS



TRISERVICE NURSING RESEARCH PROGRAM (TSNRP) RESEARCH AND EVIDENCE-BASED PRACTICE DISSEMINATION COURSE

CREATING THE SCIENCE, ADVANCING THE PRACTICE

Course Description:

The TSNRP Research and Evidence-Based Practice Dissemination Course looks to feature keynote lectures by military nursing leaders and nationally known clinical experts, in addition to:

- Break-out sessions with research and evidence-based practice presentations from TriService active, reserve, guard, and retired military nurse scientists and researchers.
- Poster session featuring research and evidence-based practice (EBP) projects relevant to military nursing.
- TSNRP-sponsored Research Interest Group team meetings and presentations, to include Anesthesia, Biobehavioral Health, Expeditionary, Health Systems/Informatics, Military Family, and Women's Health.
- This year's course will be in-person, pending DoD & CDC travel guidance. If it is not possible to have an in-person meeting, a multi-day virtual meeting will be held instead. Plenary and breakout sessions will be included.

Target audience:

Active, Reserve, Guard, and retired Nurse Corps officers from the Army, Navy, and Air Force, as well as nursing personnel working within the Military Healthcare System. Non-military nurses are welcome on a space-available basis.

Location: La Quinta Inn & Suites San Antonio Riverwalk – San Antonio, Texas

Course Dates: Monday, 13 September – Thursday, 16 September 2021

Registration: https://cvent.me/rqQKvA

CEUs: TBD

Cost: No registration fee associated with the course

Abstract Submission Abstracts to be considered for poster or podium

Pates: presentations will be accepted from 5 March to 30 April 2021.

Submitters would then be notified of the final decision no later than 21 May 2021. Travel funding for accepted presenters will be evaluated on

a case by case basis, pending DoD travel guidelines.